TOMER NO. 29863 EKAND LAW OFFICE **EO: Bo**x 69 laman River, CA 96050-0069

REISSUE APPLICATION TRANSMITTAL FORM

Atty. Docket No. SIC-04-021	PTO 73
"Express Mail" Label No. ER 541952747 US	∪.s 261
Date of Deposit April 16, 2004	0/8
	7,

MAIL STOP REISSUE COMMISSIONER FOR PATENTS P.O. BOX 1450 **ALEXANDRIA, VA 22313-1450**

Commissioner:

(530) 365-2430

Transmitted herewith for filing is the application for reissue of [X] Utility Patent, [] Design Patent, US 6,557,671 B1, issued May 6, 2003

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Inventors: KANJI KIRIMOTO, TSUYOSHI SAKASHITA, KAZUHISA YAMASHITA For: CABLE DISC BRAKE

- Enc	osed	are:

- [X] Specification and Claims in double column copy of patent format, [] with proposed amendments.
- sheet(s) of [X] formal [] informal drawing(s), [] with proposed amendments.
- [] A [] signed [] unsigned Reissue Declaration & Power of Attorney.
- [X] A [X] signed [] unsigned Reissue Declaration (37 CFR 1.175).
- Original Patent for Surrender (37 CFR 1.178)
 - [] Ribboned Original Patent Grant, or
 - [] Affidavit/Declaration of Loss.

Original U.S. Patent currently assigned: [X] Yes or []No

- [X] Written Consent of all Assignees (PTO/SB/53 or 54)
- [X] A Power of Attorney by Assignee, Consent To Reissue and Offer To Surrender The Original Patent with Certificate Under 37 C.F.R. Section 3.73(b).
- [] Foreign Priority Claim (35 USC 119).
- [X] Information Disclosure Statement under 37 CFR 1.97 [] with copies of cited foreign references.
- [X] A preliminary amendment with statement of status and support for all changes to the claims. See 37 CFR 1.173(c).
- [X] Return Receipt Postcard (MPEP 503)

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)
FOR:	NO. FILED IN REISSUE	NO. FILED IN PATENT	NO. EXTRA
BASIC FEE			
TOTAL CLAIMS	53	36	17
INDEP CLAIMS	2	3	1
[] MULTIPLE DEP	ENDENT CLAIM	1 PRESENTED	

SMALL ENTITY		OTHER THAN A SMALL ENTITY		
RATE	FEE	OR	RATE	FEE
	\$385	OR		\$770
x9=		OR	17x18=	\$306
x43=	\$	OR	1x86=	\$ 86
+145=	\$	OR	+290=	\$
TOTAL	\$	OR	TOTAL	\$1,162

* If the difference in Col. 1 is less than zero, enter "0" in Col. 2

[X] Form PTO-2038 for \$_1,162__ is enclosed. <u>Two</u> copies of this sheet are enclosed.

Telephone: (530)465-2430 Respectfully submitted, DELAND LAW OFFICE

Reg. No.: 31,242 Attorney for Applicant